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CENTRAL FAX CENTER

Licata & Tyrrell P.C.

SEP 2 9 2004

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September 29, 2004

TO: Examiner Sisson (TC1600)

GROUP: 1634

FAX NUMBER: 703-872-9307

ATTORNEY DOCKET NO.: GCI-0017

SERIAL NO.: 09/973,850

FILED: October 10, 2001

NUMBER OF PAGES: 7

MESSAGE: Attached please find Amendment Transmittal Letter; Reply to the Office Action mailed July 1, 2004; and Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

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CERTIFICATE OF Toplicant(s): Wunderink	FRANSMISSION BY FAC	CSIMULE (37 CFR 1.8)	Docket No. GCI-0017
Application No. 09/973,850	Filing Date October 10, 2001	Examiner Sisson, Bradley	Group Art Unit 1634
vention: Method for l	dentifying Increased Risk of D	eath from Community Acquired	l Pneumonia
			RECEIVED CENTRAL PAX CENTER
			SEP 2 9 2004
hereby certify that this		Reply under 37 CFR 1,116	
not be the same	sitted to the United States Pat	(Identify type of correspondence) tent and Trademark Office (Fax	. No. 703-872-9307
on September			
(Date)			•
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October 10, 2001 Sisson, Bradley L. 26259 1634 7130	AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Wundcrink and Waterer					Docket No. GCI-0017			
COMMISSIONER FOR PATENTS: CENTRAL FAX CENTER Transmitted herewith is an amendment in the above-identified application. SEP 2 9 2004 CAMPINE TO THE FEE THE SET OF THIS AMENDMENT TOTAL CLAIMS 1 - 20 = 0 x \$9.00 \$0	1 ''	_		ì		1 '			
Transmitted herewith is an amendment in the above-identified application. SEP 2 9 2004 Applicant claims small entity status. See 37 CFR 1.27 The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED CLAIMS REMAINING HIGHEST # NUMBER EXTRA RATE FEE TOTAL CLAIMS 1 20 = 0 x \$9.00 \$0.00 INDEP. CLAIMS 1 3 = 0 x \$39.00 \$0.00 INDEP. CLAIMS 1 3 = 0 x \$39.00 \$0.00 Multiple Dependent Claims (check if applicable)	Invention: Method for Identifying Increased Risk of Death from Community Acquired Pneumonia								
CLAIMS AS AMENDED CLAIMS REMAINING HIGHEST # NUMBER EXTRA RATE FEE TOTAL CLAIMS 1 - 20 = 0 x \$9.00 \$0.00 \$0.00 \$1.00 \$	Transmitted herewith is an amendment in the above-identified application. SEP 2 9 2004 Applicant claims small entity status. See 37 CFR 1.27								
CLAIMS REMAINING AFTER AMENDMENT PREV. PAID FOR CLAIMS PRESENT TOTAL CLAIMS 1 - 20 = 0 x \$9.00 \$0.00 INDEP. CLAIMS 1 - 3 = 0 x \$39.00 \$0.00 Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for amendment. Please charge Deposit Account No. in the amount of A check in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. Any additional filing fees required under 37 C.F.R. 1.16.									
TOTAL CLAIMS 1	_		HIGHEST #	NUMBER E		RATE	-		
INDEP. CLAIMS 1 - 3 = 0 x \$39.00 \$0.00 Multiple Dependent Claims (check if applicable) □ \$0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00 No additional fee is required for amendment. □ Please charge Deposit Account No. in the amount of □ A check in the amount of to cover the filling fee is enclosed. □ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 □ Any additional filling fees required under 37 C.F.R. 1.16.	TOTAL CLAIMS		T	CLAIMS PRE		\$9.00	\$0.00		
Multiple Dependent Claims (check if applicable) TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for amendment. Please charge Deposit Account No. in the amount of A check in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 Any additional filing fees required under 37 C.F.R. 1.16.			3 =	<u> </u>	0 x	\$39.00	\$0.00		
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for amendment. Please charge Deposit Account No. in the amount of A check in the amount of to cover the filing fee is enclosed. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 Any additional filing fees required under 37 C.F.R. 1.16.			licable)				\$0.00		
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Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. Dated: September 27, 2004 Kathleen A. Tyrrell, Reg. No. 38,350 Licata & Tyrrell P.C. 66 E. Main Street Mariton, NJ 08053 Tel: 856-810-1315 Fax: 856-810-1454 Signature of Person Mailing Correspondence	Please cha A check in A check in A check in A repeated communic Any a Any a Any p Payment by WARNING included of athura Kathleen A. Tyrrel Licata & Tyrrell I 66 E. Main Street Marlton, NJ 0805 Tel: 856-810-1515	arge Deposit Account In the amount of tor is hereby authorized action or credit any over additional filing fees required to the application process of credit card. Form PT is information on this point his form. Provide a Significant of the Significant of the series of	No. in to cover the filing of to charge payment of the payment to Deposit Acquired under 37 C.F.R. 10 essing fees under 37 CFO-2038 is attached.	fee is enclithe followin count No. 1.16. FR 1.17. blic. Credit n and auth Dated: State mail in an encline state on 1450, Anni con 150	osed. g fees ass 50-1619 t card inference or car	ormation sho on PTO-2038 27, 2004 respondence is ervice with suffic dressed to "Com /A 22313-1450" [:	uld not be 3. being deposited with the ient postage as first class nissioner for Patents, P.O. 37 CFR 1.8(a)]		

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RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 1634

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.:

GCI-0017

Inventors:

Wunderink and Waterer

Serial No.:

09/973,850

Filing Date:

October 10, 2001

Examiner:

Sisson, Bradley L.

Group Art Unit:

1634

Title:

Method for Identifying Increased Risk of Death from Community Acquired Pneumonia

Certificate of Facsimile Transmission

I hereby certify that this document is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

On September 29, 2004

Kathleen A. Tyrrell, Registration No. 38,350

Mail Stop, Commissioner for Patents .

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

REPLY UNDER 37 C.F.R. § 1.116

This is a reply to the Office Action mailed July 1, 2004 setting a three (3) month statutory period for response. Please enter the following remarks into the record.

Remarks begin on page 2 of this paper.

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